229 N. Sherman Ave.
Corona, CA 92882
Phone 877-AVIDINK (877-284-3465)
Fax 888-FAXAVID (888-329-2843) www.avidink.com

ORDER FORM – Samples

CUSTOMER PO #: _____

ORDER DATE: _____

REQUESTED DUE DATE: _____

SALES REP: _____

☐ **NEW CUSTOMER** ☐ **FABRIC TESTING**

BILL TO:

COMPANY: _____
ADDRESS: _____
_____
PHONE: _____
CONTACT: _____
_____

SHIP TO: (IF DIFFERENT THAN BILL TO)

COMPANY: _____
ADDRESS: _____
_____
PHONE: _____
CONTACT: _____
EMAIL: _____

FABRIC/MATERIAL ETA: _____

SHIP VIA: _____

AVID STYLE #	PAPER SIZE	AVID STYLE NAME	COMPONENTS (Garments or Cuts)	LETTER SIZE COMP	JPG: NO TEMPLATE	JPG: GARMENT TEMP:	FULL SIZE COMP	DIGITAL	DFD	PLACEMENT INSTRUCTIONS	PAPER QTY	PRICE EACH
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				☐	☐	☐	☐	☐	☐			
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SPECIAL INSTRUCTIONS: _____

_____

_____

AUTHORIZED CUSTOMER NAME & SIGNATURE: _____ **DATE**: _____

When signed by the customer, this order form serves as written authorization to produce and ship product, and becomes a legally binding contract once approved and accepted by A.V.I.D. Ink. Completed Order Form must be received to process order. Incorrect information will result in delays and/or charges. Paper size (specified as width by height in inches) must be as large or larger than dimensions of largest item. A 3 – 5% scrap rate is typical in the sublimation process. *NOTE: Incomplete information may delay the processing of this order.*